UNIVERSITY
OF GUAM   Office of Academic and Student Affairs
Unibetsedåt GUAHAN

DE

| TECHNOLOGY DELIVERED COURSE/ |
| OFF CAMPUS/DE COURSE OUTLINE FORM |

Course Number: _____   College: _____

Course Title: _____   Credit Hours: _____

Date Of Final Approval: _____   Semester Offered: _____

Course Counts As   is it part of a Degree Program? Yes / No
                        _____   general education requirement
                        _____   elective

1. **Catalog Description:**

2. **Course Content:**

3. **Rationale for the Course:**

4. **Skills and background required or expected/ prerequisite course(s):**

5. **Learning Objectives for Students:**

6. **Course Presentation / Delivery Method:**
                        _____   **Synchronous**   _____   **Asynchronous**   _____   **mix**

[Synchronous]

_____ **On-Site (location):** _____ **Date(s):**_____
(skip to # 10)

(Off-Site) _____ single site _____ multiple sites

_____ **via Audio** (Tape/CD/Satellite Radio)
_____ **via MultiMedia** (Video Tape/CD-ROM/DVD/Satellite)
_____ **via Internet** (Text /WEB/Chat Room/Steaming Audio/Video)
_____ **Other:** _____

[Asynchronous]

_____ **via Tape** (Video/Audio/CD/DVD)
_____ **via Program Materials** (Computer Disk/CD-ROM/DVD)
_____ **via Internet** (Text /WEB/Chat Room/Steaming Audio/Video)
_____ **Other:** _____

7. **Alternative Delivery Methods** (if/when planned method is not operable):

8. **Faculty-Student Interaction Plan / Methods**

9. **Assessment / Evaluation Plan** (including verification of participant's materials)

10. **Plan for Supplemental Reference , Resources & Materials and Student Access to these Resources (**Library/Media**):**

11. **Plan for Student Advisement / Counseling**

12. **Required and recommended texts and/or study guides:**

_____Approved _____Disapproved _____ _____
Senior Vice President, Academic & Student Affairs   Date